Supplemental Application Data Sheet

Application Information Application Type:: Regular Subject Matter:: Utility Suggested Classification:: Suggested Group Art Unit:: CD-ROM or CD-R?:: None Number of CD Disks:: Number of Copies of CDs:: Sequence Submission?:: Computer Readable Form (CRF)?:: Number of copies of CRF:: Title:: Attorney Docket Number:: Request for Early Publication?:: No Request for Non-Publication?:: No Suggested Drawing Figure:: **Total Drawing Sheets:** Small Entity?:: Yes Latin Name:: Variety Denomination Name:: Petition Included:: No Petition Type:: Licensed US Govt. Agency:: Contract or Grant Numbers:: Secrecy Order in Parent Appl.?:: No **Applicant Information** Applicant Authority Type:: Inventor Primary Citizenship Country:: Status:: Full Capacity Given Name:: Middle Name::

Family Name::				
Name Suffix::				
City of Residenc	e::			
State or Province	e of Residence::			
Country of Resid	lence::			
Street of Mailing	Address::			
City of Mailing A	ddress::			
State or Province	e of Mailing Address::			
Country of Mailir	ng Address::			
Postal or Zip Cod	de of Mailing Address::			
Applicant Authority Type:: Inventor				
Primary Citizens	hip Country::	Israel		
Status::		Full Capacit	ty	
Given Name::				
Middle Name::				
Family Name::				
Name Suffix::				
City of Residenc	e::			
State or Province	e of Residence::			
Country of Resid	lence::			
Street of Mailing	Address::			
City of Mailing A	ddress::			
State or Province	e of Mailing Address::			
Country of Mailir	ng Address::			
Postal or Zip Cod	de of Mailing Address::			
Correspondence	e Information			
Correspondence Customer Number::		001444		
Representative	Information			
Representative Customer Number::		001444		
Domestic Priori	ty Information			
Application::	Continuity Type::		Parent	Parent Filing

This Application

National Stage of

Page #2 Initial 9/8/2008

Application::

Date::

Appln claiming benefit of 35 USC 119(e)

Foreign Priority Information

Country:: Application Number:: Filing Date:: Priority Claimed::

Assignment Information

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::